

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P09000035398

1. Entity Name
COASTAL STRATEGIES, INC.



FILED

12 MAY 23 AM 10:40

OFFICE OF THE
CLERK OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
4205 SALTWATER BLVD
SUITE 100
TAMPA, FL 33615 US

Mailing Address
4205 SALTWATER BLVD.
TAMPA, FL 33615 US

2. Principal Place of Business - No P.O. Box #

4205 Saltwater Blvd.

Suite, Apt. #, etc.

Suite 100

City & State

Tampa, FL

Zip

33615

Country

USA

3. Mailing Address

4205 Saltwater Blvd.

Suite, Apt. #, etc.

City & State

Tampa FL 33615

Zip

33615

Country

USA

05102012

Chg-P

CR2E034 (12/11)

4. FEI Number

26-4757713

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TONER, STEPHEN J
4205 SALTWATER BLVD.
TAMPA, FL 33615-5630

7. Name and Address of New Registered Agent

Name

N/A

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Stephen J. Toner

Signature, typed or printed name of registered agent and title if applicable

Stephen J. Toner

(NOTE: Registered Agent signature required when reinstating)

4-29-12

DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 28, 2012**

9. Election Campaign Financing
Trust Fund Contribution.

☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete

NAME TONER, STEPHEN J
STREET ADDRESS 4205 SALTWATER BLVD.
CITY- ST- ZIP TAMPA, FL 33615

TITLE CEO ☐ Delete

NAME TONER, PAMELA A
STREET ADDRESS 4205 SALTWATER BLVD
CITY- ST- ZIP TAMPA, FL 336155630

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY- ST- ZIP

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TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Stephen J. Toner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

4-29-12 Steve@CoastalStrategies.com

E-MAIL ADDRESS

MAY 23 2012

S. PRATHER